



LOBBYIST EMPLOYER'S REPORT OF REGISTERED LOBBYISTS AND EXPENSES

L3

Office of Risk Management Services
Lobbyist Registration Program
500 Fourth Ave., Suite 320
Seattle, WA 98104-1818
206-263-9753

KING COUNTY OFFICE USE ONLY

1. EMPLOYER'S NAME (Use complete company, association, union or entity name.)			
ATTENTION (Identify person to whom inquiries about the information below should be directed; NOT the Lobbyist.)			
MAILING ADDRESS			
CITY	STATE	ZIP	New Address? <input type="checkbox"/> No <input type="checkbox"/> Yes

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY, including expenditures made and accrued during the previous calendar year incurred by all lobbying. Complete all sections. Use "none" or "0" when applicable.

2. TOTAL EXPENDITURES: Amount of total expenses incurred by the reporting person/entity for lobbying purposes, whether through or on behalf of a registered lobbyist or otherwise (including all expenditures listed in #3).	
3. NAMES & EXPENDITURES PER EACH LOBBYIST: The name and address of each lobbyist, registered under Ordinance 13320, employed by the reporting person and the total expenditures made by lobbyist and attributed or reimbursed by employer for lobbying purposes.	

Name of Registered Lobbyists (if payments were to lobby firm, list firm name)	Address of Registered Lobbyist	Total Expenditures by or for each Lobbyist

Continued on attached pages? ☐ No ☐ Yes

Total From Attached
Page:

I certify that this report is true and complete to the best of my knowledge.

EMPLOYER SIGNATURE

DATE